## Aurora Fire Department

Fire Prevention Bureau. 5 E. Downer Pl. #G Aurora, IL 60505-3305

Fire Marshal Web: www.aurora-il.org (630) 256-4130 / Fax (630) 256-4139 Email: fpb@aurora-il.org Gary Krienitz Application for Assembly Operational Permit Section 105.6.4 Normal Use pecial Event Carnival Fair Circus Special Amusement Circle Type Event (Business) Name Location of Event Applicant's Name E-mail Address: ( Class of Assembly (circle all that apply) Above Grade \_\_\_ At Grade \_\_\_ At Grade \_\_ Over 600 \_\_\_ Over 1000 \_\_\_ Occupant load posted? Y Fire Extinguishers present? Y N How Many 250 Kitchen present? Y N Liquer License: Y N Class of Liquor License: No smoking signs posted: N/A Y N Fire Alarm: Y N Sprinkler System: Y N Hood System: Y N Live Entertainment? NA YW N Sometimes How Often? Type: Band DJ Other (explain) Stage: None\_\_ Temporary\_\_ Permanent
Will you use a smoke machine? Y \_\_ N \_\_ Will you use Pyrotechnic Displays? Y \_\_ N \_\_ Method to determine number of occupants present: Ticket sales: Door Presales Both provide ticket manifest Describe Will a tent be used? Y \_ N \_ (Separate building permit may be required) Number of exits (attach separate sheet for additional tents) Electric exit signs Y N Emergency light Y \*NOTICE: No smoking, no combustibles (hay, straw, and like materials), and no open flames allowed inside tent or within twenty (20) feet of the tent. Documents required for all Assembly Uses \*(attach copies) Provide site plan (indicate lot lines, parking, tents, building, streets, and vendors) Provide information on Emergency Evacuation plan and Fire Safety Plan\*\* Seating Plan (provide copy) Crowd control manager(s) name (1 per 250 occupants. Attach list of names and certificates) \* For class go to: https://crowdmanagers.com/training/ Letter from property owner-permission for use of land \*All requests for drawings may be on one plan as long as it is clear Contact Aurora Police Department 630-256-5700 for requirements. Fur would With the formation is true to the best of my knowledge. False or incorrect information may result in permit being revoked. Applicant signature Print Name PERMIT MUST BE SUBMITTED TWO WEEKS PRIOR TO EVENT Office Use

Site Plan \_\_Evacuation Plan \_\_Fire Safety Plan \_\_ Seating Plan \_\_ Crowd Control \_\_ Occupant Load \_\_